CLAIMS AS FILED - PART I (Column 1) (Column 2) FOR NUMBER FILED NUMBER EXTRA BASIC FEE SMALL ENTITY TYPE		PATENT APPLICATION FEE DETERMINATION RECORD														
CLAIMS AS FILED - PART I (Column 1) (Column 2) (Column 2) (Column 3) (Column 3) (Column 3) (Column 4) (Column 3) (Column 3) (Column 4) (Column 4) (Column 1) (Column 5) (Column 1) (Column 1) (Column 1) (Column 1) (Column 3) (Column 4) (Column 4) (Column 4) (Column 5) (Column 5) (Column 6) (Column 7) (Column 7) (Column 7) (Column 8) (Column 1) (Column 2) (Column 3) (Column 1) (Column 1) (Column 1) (Column 2) (Column 3) (Column 3) (Column 4) (Column 4) (Column 5) (Column 6) (Column 7) (Column 7) (Column 8) (Column 8) (Column 1) (Column 1) (Column 1) (Column 1) (Column 2) (Column 3) (Column 3) (Column 3) (Column 4) (Column 4) (Column 5) (Column 6) (Column 6) (Column 7) (Column 7) (Column 8) (Column 8) (Column 8) (Column 8) (Column 1) (Column 2) (Column 3) (Column 4) (Column 4) (Column 4) (Column 5) (Column 6) (Column 6) (Column 7) (Column 7) (Column 8) (Column 8) (Column 8) (Column 8) (Column 1) (Column 1) (Column 1) (Column 1) (Column 1) (Column 2) (Column 3) (Column 4) (Column 3) (Col												OG	16	533	382	
BASIC FEE												ντιτν	1	OTHE	R THAN	
Sada	FC	OR .	,													_
TOTAL CLAIMS MINDEPENDENT CLAIMS 2 minus 3 =	BASIC FEE											-	3. 600 m		\exists	
INDEPENDENT CLAIMS MULTIPLE DEPENDENT CLAIM PRESENT	TOTAL CLAIMS			k	o minus	20=	•				* "		┧┈	TAR BENEVAL SALVA	030.00	-
*If the difference in column 1 is less than zero, enter "0" in column 2 **CLAIMS AMENDED - PART II **COlumn 1) (Column 2) (Column 3) **CLAIMS ARENDRENT PREVIOUSLY PREVIOUSLY PAID FOR III **If the difference in column 1 is less than zero, enter "0" in column 2 **CLAIMS AMENDED - PART II **CLAIMS ARENDRENT PREVIOUSLY PRESENT PREVIOUSLY PAID FOR ITONAL FEE **If the difference in column 1 is less than zero, enter "0" in column 2 **CLAIMS AMENDRENT PREVIOUSLY PRESENT PRESENT PREVIOUSLY PAID FOR ITONAL FEE **If the difference in column 1 is less than zero, enter "0" in column 2 **CLAIMS ARENDRENT PRESENTATION OF MULTIPLE DEPENDENT CLAIM* **If the difference in column 1 is less than zero, enter "0" in column 2 **CLAIMS ARENDRENT PRESENT AMENDRENT PREVIOUSLY PAID FOR ITONAL FEE **If the difference in column 1 is less than zero, enter "0" in column 2 **CLAIMS ARENDRENT PRESENT AMENDRENT PREVIOUSLY PAID FOR ITONAL FEE **COLUMN 1) (Column 2) (Column 3) **CLAIMS AMENDRENT PREVIOUSLY PAID FOR ITONAL FEE **TOTAL DOTAL DOTAL ADDIT. FEE **TOTAL DOTAL DOTAL ADDIT. FEE **TOTAL DOTAL ADDIT. FE	INDEPENDENT CLAIMS			0			•			-			OR			4
TOTAL CLAIMS AS AMENDED - PART !! (Column 1) CLAIMS AS AMENDED - PART !! (Column 2) CLAIMS AS AMENDED - PART !! (Column 3) CLAIMS REMAINING REMAINING PREVIOUSLY PART PAID FOR PRESENT PRESENTATION OF MULTIPLE DEPENDENT CLAIM Total COlumn 1) Column 2) COlumn 3) FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM COlumn 3) CLAIMS REMAINING REMAININ								1	X39=	_	•	OR	X78=		4	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) (Column 3) (Column 3) (Column 3) (Column 4) (Column 2) (Column 3) (Column 3) (Column 3) (Column 4) (Column 4) (Column 5) (Column 5) (Column 7) (Column 1) (Column 2) (Column 3) (Column 3) (Column 1) (Column 2) (Column 3) (]	+130			OR	+260=	İ	
Column 1 Column 2 Column 3 SMALL ENTITY OR SMALL ENTITY	11											345	OR	TOTAL		
TOTAL OR ADDITED TO TOTAL ADDITED TO T	10.1										{	iTiT マ	OB.			
AAFTER AMENDMENT PAID FOR PREVIOUSLY PAID FOR EXTRA TOTAL			CL	AIMS	100		HIGHEST) r	SINAL			7 7	SMALL		┨
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +130= OR +260= OR ADDIT. FEE COlumn 1)			AF	TER		PF	REVIOUSLY			RATE	T	TIONAL		RATE	TIONAL	- 1
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +130= OR +260= OR ADDIT. FEE COlumn 1)	NDM	Total	• .	20	Minus		20	= /	1	X\$ 9=			OR	X\$18=	ree	1
130 OR 1260	AME			3.			. 3	-0	1 t	X39=	1		1	X78=		1
COlumn 1) (Column 2) (Column 3) CLAIMS REMAINING REMAINING AFTER RAMENDMENT PREVIOUSLY PAID FOR LINE PAID FOR LINE PREVIOUSLY PAID FOR LINE PREVIOUSLY PAID FOR LINE PAID FOR LINE PAID FOR LINE PREVIOUSLY PAID FOR LINE PREVIOUSLY PAID FOR LINE PREVIOUSLY PAID FOR LINE PREVIOUSLY PAID FOR LINE PA		FIRST PRESE	ENTATIO	N OF M	ULTIPLE DE	PEND	ENT CLAIM		J	±130-	+			1260-		1
Column 1) (Column 2) (Column 3) CLAIMS REMAINING AFTER AMENDMENT Total Total Column 1) (Column 2) (Column 3) RATE RATE RATE RATE RATE RATE RATE RAT									L	TOTA	Λ.		{			4
CLAIMS REMAINING AFTER AMENDMENT PREVIOUSLY PAID FOR PRESENT EXTRA PAID FOR PAID FO			(Colu	mn 1)		IC.	olumn 2)	(Column 2)		DDIT. FE	E		JOH	ADDIT. FEE		┥
AFTER AMENDMENT PREVIOUSLY PAID FOR EXTRA PAID FOR EXTRA FEE TIONAL FEE TOWN AMENDMENT PAID FOR EXTRA FEE TOWN AMENDMENT PAID FOR EXTRA FEE TOWN AMENDMENT PAID FOR TOTAL ADDIT. FEE TOWN ADDI	IDMENT B		CL	AIMS		-	HIGHEST		lr	-	I	DDI-	1		ADDI	4
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			AF	TER		PA	EVIOUSLY			RATE	TI	ONAL		RATE	TIONAL	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM		Total		17	Minus	••	20	=	l t	X\$ Q=	╁	ree_		Y\$19_	FEE	1
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM	RE	Independent	•	8	Minus	•••	3	= 5	I		╂		ОН		11.1-1	1
(Column 1) (Column 2) (Column 3) CLAIMS REMAINING AFTER AMENDMENT Total Independent Minus ٩	FIRST PRESE	NTATIO	N OF MI	JLTIPLE DEI	PEND	ENT CLAIM		▎┞		╂		OR	X76=	440	1	
(Column 1) (Column 2) (Column 3) CLAIMS REMAINING AFTER AMENDMENT Total Independent Minus *** FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM *** If the entry in column 1 is less than the entry in column 2, write "0" in column 3. *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3 enter "20." *** *** *** *** *** *** ***									L				OR	+260=		
CLAIMS REMAINING AFTER AMENDMENT Total Independent FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3 enter "3" TOTAL ADDITIONAL FEE ADDITIONAL FEE X\$ 9= OR X\$18= X39= OR TOTAL ADDIT. FEE OR TOTAL ADDIT. FEE OR TOTAL ADDIT. FEE OR TOTAL ADDIT. FEE									Al				OR ,		440]
REMAINING AFTER AMENDMENT PREVIOUSLY PAID FOR TOTAL ADDITIONAL FEE Total • Minus • • = X\$ 9= OR X\$18= Independent • Minus • • = X39= OR X78= FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." TOTAL ADDIT. FEE ADDITIONAL FEE X\$ 9= OR X\$18= Y78= OR TOTAL ADDIT. FEE OR TOTAL ADDIT. FEE	-				Para Barana			(Column 3)	ı <u>—</u>							
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3 enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3 enter "3."	MENT C		REMA	INING		N	NUMBER			RATE				DATE		1
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3 enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3 enter "3."			AMEN	MENT				- CATHA	_					HAIE		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3 enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3 enter "3."			•					 		X\$ 9=		·	OR	X\$18=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3 enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3 enter "3."	¥		L	N OF ML	1		ENT CLAIM	Ľ		X39=			OR	X78=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3 enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3 enter "3."										+130=	T		Ī	+260=		
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3 enter 3.	• # •• #	the entry in column the "Highest Num	nn 1 is les nber Prev	se than the	e entry in colum	mn 2, v	vrite "0" in col	umn 3.	. L	TOTAL				TOTAL		1
the appropriate box in counting to	"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3" ADDIT, FEE													l		
RM PTO-875					•					a	المان وموم	was nox				

FORM PTO-875 (Rev. 12/99)

Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE